STATE OF MARYLAND
DEPARTMENT OF ASSESSMENTS AND TAXATION
PERSONAL PROPERTY DIVISION
301 West Preston Street, Room 801
Baltimore, MD 21201-2395
www.dat.maryland.gov
(410) 767-4991 • (888) 246-5941 within Maryland

CHECK IF THIS IS A CHANGE

MRS 1-800-735-2258 TT/VOICE

d ANNUAL PERSONAL PROPERTY RETURN OF SOLE PROPRIETORSHIPS AND GENERAL PARTNERSHIPS

AS OF JANUARY 1, 2015 DUE APRIL 15, 2015

OF MAILING ADDRESS
OWNER'S NAME, TRADING AS NAME, AND MAILING ADDRESS:

2015

Form AT3-51 Page 1 of 2

Date Received by Department

| | | | DEPARTMENT II | D NO. | |
|-----|---|----------------|--|---------------------------------------|--------------------------------------|
| | Please check here if you want personal property forms mailed to you next year. | | | | |
| PA | ART A | | | | |
| 1. | Provide your federal employer ID # | | (if none, provide | social security nur | mber of owner). |
| 2. | Provide your federal principal business code # | | (from | IRS Schedule C o | or Form 1065). |
| 3. | IMPORTANT: List exact location of all personal property repo This assures proper distribution of assessments. If property copies of Part B for each location. | | | | |
| | NOTE: If all of the personal property of this business is located equeen Anne's, or Talbot, you may be eligible to skip Part B, Li Refer to Specific Instructions, Part A, 3 for more information. | | | | |
| | (STREET NUMBER & NAME) (ZIP C | CODE) | (COUNTY) | | (INCORP. TOWN) |
| | Check if this location has changed from the 2014 return. | | | | |
| 4. | State your nature of business or profession: | | | Date began:_ | |
| 5. | Total gross sales or amount of business transacted during 2014. \$ If the business has sales in Maryland and does not report any property without personal property. If the business is using the address of that business. | personal pro | perty, in remarks boroperty of another | pelow explain hov business, provic | v the business is le the name and |
| 6. | Only sole proprietors complete questions 6a and 6b. | | | | |
| 6a. | . Is this location the principal residence of the business owner?(Ye | es or No) | | | |
| 6b. | Is the total original cost of all the property, including inventory and If you answer yes to both 6a and 6b, your property is exempt. Skip to signature line on page 2. | excluding lic | ensed vehicles, les | ss than \$10,000? (Yes or No) | |
| 7. | State the opening and closing dates of your fiscal year. | | | | |
| 8. | Do you have any fully depreciated property or property expensed | under IRS ru | ıles? | _ If yes, have you | I |
| | included such property on this return?(Yes or No) | | (Yes or No) | | |
| 9. | Property leased by your business. See Instructions for Part A, 9. | | | | |
| 10. | Has the business disposed of assets during 2014? I year of acquisition and manner of disposal. (Yes or No) | lf yes, supply | a schedule of disp | osition by | |
| REN | EMARKS | | | | |
| | | | | | |
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PART B

① Furniture, fixtures, office equipment, tools, machinery, equipment NOT used in manufacturing or research and development. See Instruction ①. Failure to provide the required detail will result in the reported property being assessed at 10% rate of depreciation.

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| | Α. | ı | В | SPECIAL DEPRE | CIATION RATES D | E (See Instructi | on (1) | G | T-6 | OTAL COST |
|--|--|---|---|--|---|---|---|--|---|--|
| 2014 | <u> </u> | | | | | | | | | JIAL GOO |
| 2013 | | | | | | | | | | |
| 2012 | | | | | | | | | | |
| 2011 | | | | | | | | | | |
| 2010 | | | | | | | | | | |
| 2009 | | | | | | | | | | |
| 2008 | | | | | | | | | | |
| 2007 and prior | | | | | | | | | | |
| | | | | | | | TOTAL COST CO | L LUMNS A-G | ; → | |
| Average Month \$ | | | Openi | sh from the late ng Inventory - ig Inventory - o | date | | amou | | | |
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